

SCC eFile

**2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

214512377

1.) CORPORATION NAME:

**CARPET CARE OF CENTRAL VIRGINIA, INC.**

DUE DATE: **2/28/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**THOMAS A ROGERS  
304 OAKLEY AVE  
LYNCHBURG, VA**

SCC ID NO: **02986289**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**LYNCHBURG CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 304 OAKLEY AVE

CITY/ST/ZIP: LYNCHBURG, VA 24501

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	THOMAS A ROGERS		
TITLE:	Pres/Treas		
ADDRESS:	304 OAKLEY AVE		
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24501		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JERROD M RUHL		
TITLE:	Vice President		
ADDRESS:	304 OAKLEY AVENUE		
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24501		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	TAYLOR BLAKE SYDNOR		
TITLE:	SECRETARY		
ADDRESS:	304 OAKLEY AVE		
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24501		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ THOMAS A ROGERS</u>	<u>THOMAS A ROGERS, Pres/Treas</u>	<u>3/6/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.